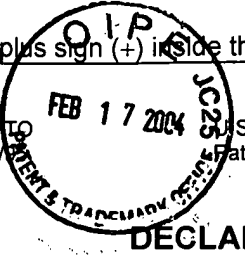


Type a plus sign (+) inside this box → [+]

 0010/PTO Rev. 6/01 DECLARATION <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing	Attorney Docket	ANDPAT/177/US
	First Named Inventor	Franz HAIDER
	COMPLETE IF KNOWN	
	Application Number	10/684,755
	Filing Date	October 14, 2003
	Group Art Unit	1731
	Examiner Name	

As an above named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE FOR CONTINUOUS DRYING OF A PULP SHEET

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) October 14, 2003, as United States Application or PCT International Application Number 10/684,755 and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Codes of Federal Regulations, §1.56.

I hereby claim foreign priority under Title 35, United States Code § 119 (a)-(d) or § 365 (b) of any foreign application(s) for patent or inventor's certificate, or § 365 (a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Copy Attached	
				Yes	No
A 1552/2002	AUSTRIA	10/14/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code § 119 (e) of any United States provisional application(s) listed below:

Application Number(s)	Filing Date (MM/DD/YY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

DECLARATION

Page 2

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Title Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT International application numbers are listed on a supplementary priority sheet attached hereto.

As a named inventor, I hereby appoint the registered practitioners associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office therewith, and direct that all correspondence be addressed to that Customer Number:

Firm Name:

Alix, Yale & Ristas, LLP

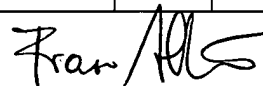
Customer Number:

002543

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

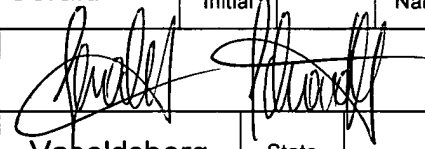
Name of Sole or First Inventor

☐ A petition has been filed for this unsigned inventor

Given Name	Franz	Middle Initial		Family Name	HAIDER	Suffix	
Inventor's Signature					Date	2. Feb. 2004	
RESIDENCE: City	Graz	State		Country	AUSTRIA	Citizenship	AUSTRIAN
POST OFFICE ADDRESS	Posenergasse 17						
City	Graz	State		Zip	A-8045	Country	AUSTRIA
						Applicant Authority	

Name of Additional Joint Inventor, if any:

☐ A petition has been filed for this unsigned inventor

Given Name	Gerald	Middle Initial		Family Name	SCHADLER	Suffix	
Inventor's Signature					Date	2.2.2004	
RESIDENCE: City	Vasoldsberg	State		Country	AUSTRIA	Citizenship	AUSTRIAN
POST OFFICE ADDRESS	Schemerlhöhe 128						
City	Vasoldsberg	State		Zip	A-8302	Country	AUSTRIA
						Applicant Authority	

☒ Additional inventors are being named on supplemental sheet(s) attached hereto.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	--

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name		Wilhelm			Middle Initial					Family Name		MAUSSER			Suffix									
Inventor's Signature		<i>Wilhelm Mausser</i>								Date		02.02.2004												
RESIDENCE: City		Graz			State					Country		AUSTRIA			Citizenship		AUSTRIAN							
POST OFFICE ADDRESS		Berliner Ring 61																						
City		Graz			State					Zip		A-8047			Country		AUSTRIA			Applicant Authority				

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name					Middle Initial					Family Name					Suffix									
Inventor's Signature										Date														
RESIDENCE: City					State					Country					Citizenship									
POST OFFICE ADDRESS																								
City					State					Zip					Country					Applicant Authority				

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name					Middle Initial					Family Name					Suffix									
Inventor's Signature										Date														
RESIDENCE: City					State					Country					Citizenship									
POST OFFICE ADDRESS																								
City					State					Zip					Country					Applicant Authority				

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name					Middle Initial					Family Name					Suffix									
Inventor's Signature										Date														
RESIDENCE: City					State					Country					Citizenship									
POST OFFICE ADDRESS																								
City					State					Zip					Country					Applicant Authority				

Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor														
Given Name					Middle Initial					Family Name					Suffix									
Inventor's Signature										Date														
RESIDENCE: City					State					Country					Citizenship									
POST OFFICE ADDRESS																								
City					State					Zip					Country					Applicant Authority				

<input type="checkbox"/> Additional inventors are being named on supplemental sheet(s) attached hereto									
--	--	--	--	--	--	--	--	--	--